DISABILITY: WORK SESSIONS

Prepared by Sheri Heffelfinger, Legislative Research Analyst for the

Subcommittee on Disability and Retiree Health Care (of the SAIC)

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Issues and Options Worksheet #1

(updated as of February 29, 2000)

<u>lssue #1:</u>	Should the Subcommittee move forward by recommending an employer- sponsored disability plan (keeping in mind that this question arises from the fact that there is not disability plan for DC plan participants in PERS)?
	X YES (adopted without objection 2/29/00)
	NO
Issue #2:	If yes, then who should the disability plan cover?
	a. DC plan participants in PERS
	b. DB plan participants in PERS
	c. state employees (regardless of retirement plan)
	_ X _ d. employees of all employers who participate in PERS (adopted without objection 2/29/00)
	e. employees in other (specify which) public retirement systems
	* * *
	Issues and Options Worksheet #2 (for March 31, 2000)
Issue #3:	Which conceptual option would the Subcommittee like to further develop?
	a. Option A: Current DB retirement plan disability provisions

extended to DC plan.

PERS	D. (members (would supplement current DB and DC provisions).
2001Session	C.	Option C: Ask PER Board to develop a proposal for the
	d.	Other (specify) DISABILITY WORK PAPER #2 Prepared by Sheri Heffelfinger, Legislative Research Analyst

for the Subcommittee on Disability and Retiree Health Care (for March 31, 2000)

On March 7, 2000, legislative staff coordinated a working group meeting to discuss disability plan design options. The following people were able to participate:

- < Mr. Mike O'Connor, Executive Director, PER Board
- Mr. Kelly Jenkins, Chief Legal Council, PER Board
- Ms. Kathy Samson, DC Plans and Educational Services
- < Mr. Dave Senn, TRS Executive Director
- < Mr. John McEwen, State Personnel Division Administrator
- < Ms. Joyce Brown, Benefits Bureau Chief
- < Ms. Sheri Heffelfinger, Legislative Research Staff

The following people were invited but were unable to attend:

- < Mr. Glen Leavitt, Benefits Director, Commissioner of Higher Education
- < Mr. Tom Schneider, MPEA
- < Mr. Tom Bilodeau, MEA

The following options and staff analysis is based on the 3/7/00 working group discussion and additional staff research. Each option is described in further detail on subsequent pages.

OPTION A: Provide DC plan participants with same benefit as provided in DB plan. (No change to DB plan so DC participant will get same disability benefit as in DB plan.)

OPTION B: Purchase (or self-insure) a long-term disability plan for all PERS participants similar to what the University System provides for all employees regardless of retirement plan.

OPTION C: Ask the PER Board to develop and propose a disability plan; adopt committee policy guidance in areas of particular concern.

OPTION A:

Provide DC plan participants with same benefit as provided in DB plan. (No change to DB plan so DC participant will get same disability benefit as in DB plan.)

- < <u>Participation:</u> mandatory, pooled self-insurance fund for DC plan members (DB members have pension trust fund)
- < <u>Eligibility:</u> must be vested in the retirement plan, (i.e., have at least 5 years of service)
- < <u>Administration:</u> Board administers, determines if member is "permanently" and "totally" disabled from any PERS-covered job
- < <u>Benefit amount:</u> fixed at same amount as provided now to disabled DB plan members (1.786% x FAS x years of service)
- < <u>Paid until:</u> age 60 (which is normal retirement age in DB plan at which time the disability benefit is converted to a service retirement)
- < <u>Cost:</u> initially 0.43% of payroll (or roughly \$7.83/mo per employee), would be rolled into "Plan Choice Rate" and adjusted by Board
- < Funding: Employer contributions

Advantages

- <u>Equality</u>: benefit paid to DB and DC plan participants would be based on the same formula
- <u>Simplicity:</u> does not require any change to the current DB plan
- <u>No DB plan funding issues:</u> would not raise concerns about infringement of DB plan funding obligations
- Lower administrative costs: would not require new administrative procedures or contracting out

<u>Disadvantages</u>

- <u>Tied to retirement plan:</u> a member with less than 5 years of service in either retirement plan would not be covered; does not target "income replacement"
- Funding for DC plan: unless contributions are increased, the amount paid to DC plan accounts will be reduced
- Cost may change: depending on experience of the DC plan disability trust fund, the cost may fluctuate up or

down

- <u>Actuarial liabilities:</u> as self-funded plan, would need actuarial determinations, potential for unfunded liabilities

OPTION B:

Purchase (or self-insure) a long-term disability plan for all PERS participants similar to what the University System provides for all employees regardless of retirement

- < <u>Participation:</u> mandatory for all PERS members
- < <u>Eligibility</u>: coverage would begin from start of employment
- < <u>Administration:</u> contracted out with insurance provider/administrator (or self-insured)
- Senefit amount: would be determined through contract with insurance provider or based on what the self-insured fund could afford, typical coverage would target "income replacement" percentage (such as 60% of final salary in U-System plan), could involve an "offset" against other disability income and/or a "back stop", which provides a minimum benefit.
- < <u>Paid until:</u> typically, benefits would be paid until age 65, but could negotiate this up or down depending on what is affordable
- Cost: would likely fluctuate, typically set at a certain amount per employee (U-system offers 3 options costing \$4.70, \$7.25, and \$9.05, respectively, per employee per month)
- < <u>Funding:</u> could be employer contributions, employee contributions, or a combination of both

<u>Advantages</u>

- <u>Flexibility:</u> can contract for type of coverage desired, or self-insure
- <u>Choice:</u> could offer employees different options
- <u>Not tied to retirement plan:</u> eligibility would not depend on years of service or vesting in a retirement plan, targets

<u>Disadvantages</u>

- <u>Funding</u>: would require increased employer and/or employee contributions
- <u>Cost and coverage could change:</u> insurance provider could raise rates or cut benefits to keep pace with actual costs
- Actuarial liabilities if self-insured: a

- "income replacement"
- <u>No DB plan issues:</u> DB plan funding could be left unchanged
- No reduction in DC plan funding: DC plan funding could be left unchanged
- No actuarial liabilities unless selfinsured: if contracted out, no employer actuarial liabilities.

self-insured fund would require actuarial funding and may result in actuarial liabilities (premiums or coverage would have to be adjusted from time to time to keep the fund sound)

OPTION C:

Request the PER Board develop and propose (through legislation) a disability plan, set legislative policy guidance in areas of particular concern to the legislature.

- < <u>Participation:</u> could specify mandatory or voluntary plan
- < <u>Eligibility:</u> could specify criteria of primary concern to legislature
- Administration: could allow Board to decide (or the committee could specify)whether the plan is to be self-insured or contracted out
- < <u>Benefit amount:</u> could target income replacement percentage, provide a benefit formula, or specify a minimum amount
- < Paid to: could leave this up to Board or specify (e.g., age 60 or 65)
- < <u>Cost:</u> could have the Board estimate costs based on their proposal, or set an amount (either a flat \$ or % of salary) as a limit
- < <u>Funding:</u> could specify employer contributions, employee contributions, or a combination of both

<u>Advantages</u>

- Board given latitude to apply expertise: within guidelines adopted by the SAIC, the Board could develop a plan they think would best serve the DB and DC plan members

<u>Disadvantages</u>

- <u>Legislature in reactive mode:</u> 2001 Legislature would have to react to the Board's proposal (Board already seems to favor Option A approach).

- Could integrate with DC plan implementation: Board could include disability plan considerations with its implementation of the DC plan
- DC plan implementation is for July 1, 2002: if legislature does not pass Board recommendations, the disability plan could not be integrated with DC plan implementation time line